

9/21/01

00-CV-1460

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Write your name and address on the reverse of this card to the back of the mailpiece, the front if space permits.

Addressed to:

W. Selkowitz, Esq.
Attorney's Office
Box 11754
Harrisburg, PA 17108

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

SEP 07 2001

C. Signature

X

Patricia M. M...

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Number

(from service label)

3811, March 2001

Domestic Return Receipt

102595-01-M-1424

FILED

SEP 20 2001

PER

HARRISBURG, PA.

DEPUTY CLERK

PLACE STICKER AT TOP OF ENVELOPE

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Write your name and address on the reverse of this card to the back of the mailpiece, the front if space permits.

Addressed to:

Nedra Greene, Esq.
Roosevelt Ave #202
K... PA 17404

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

SEP 17 2001

C. Signature

X

Nedra Greene

☐ Agent

☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

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